Rec'd PCT/PTO 3 0 NOV 2004

COMBINED DECLARATION FOR PATENT APPL Includes Reference to PCT International Applications	Attorney's 5255-38	1					
As a below named inventor, I hereby declare that:							
My residence, post office address and citizenship are as st	tated below next to my n	ame.					
I believe I am the original, first and sole inventor (if on plural names are listed below) of the subject matter which	ly one name is listed be is claimed and for which	clow) or an original, first tha patent is sought on th	and joint invention er	ventor (if ntitled:			
Door	LEAF ACTUATOR						
the specification of which (check only one item	below)	•					
[] is attached hereto		1		:			
[] was filed as United States application	on						
Serial No.							
On Contact to the con							
And was amended							
On _ (if applicable).	On _ (if applicable).						
[x] was filed as PCT international appl	ication						
Number PCT/EP2004/00088							
On 9 January 2004							
And was amended under PCT Article	19	•		-			
on (if appli	cable).						
I hereby state that I have reviewed and understand the amended by any amendment specifically referred to above	e.						
I acknowledge the duty to disclose information which continuation-in-part applications, material information wh the national or PCT international filing date of the continu	ich became available be	tween the filing date of the	FR 1.56, inch ne prior applic	uding for ation and			
I hereby claim foreign priority benefits under 35 U.S.C inventor's or plant breeder's rights certificate(s), or 365 country other than the United States of America, listed be application for patent, inventor's or plant breeder's rights before that of the application on which priority is claimed.	(a) of any PCT internated below and have also identificate(s), or any PC	ional application which on tified below, by checking	designated at lig the box, an	y foreign			
PRIOR FOREIGN/PCT APPLICATION	ONS AND ANY PRIOR	RITY CLAIMS UNDER	35 U.S.C. 11	19:			
Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority C Under 35 U	Claimed .S.C. 119			
Germany	103 00 822.5	10 January 2003	[x] YES	[] NO			
PCT	PCT/EP2004/00088	9 January 2004	[,]] YES	[]·NO			
			[]YES	[] NO			
			[] YES	[]NO			
		· · ·	[] YES	[] NO			
			[] YES	[] NO			
			LLYES	LINO			

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

Attorney's Docket. 5255-38PUS

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at *Cohen, Pontani, Lieberman & Pavane* to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

Customer number \$7799

Send correspondence to: Cohen, Pontani, Lieberman & Pavane at the address for the following customer Number: 27799

Direct Telephone calls to: (name and telephone number) Thomas C. Pontani (212) 687-2770

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

issuing thereon.					
FULL NAME OF INVENTOR	FAMILY NAME DRUX	FIRST GIVEN NAME Matthias	SECOND GIVEN NAME		
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FULL NAME OF INVENTOR	FAMILY NAME HUFEN	first given name Michael	SECOND GIVEN NAME		
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RESIDENCE, CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY		
	FULL NAME OF INVENTOR OF INVEN	RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF FAMILY NAME HÄNSCH RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF FAMILY NAME HÄNSCH RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF FAMILY NAME WILDFÖRSTER RESIDENCE, CITIZENSHIP FULL NAME OF FAMILY NAME WILDFÖRSTER RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS POST OFFICE ADDRESS POST OFFICE ADDRESS POST OFFICE ADDRESS Beyenburger Str. 11a FULL NAME OF FAMILY NAME HUFEN RESIDENCE, CITIZENSHIP CITY Wuppertal POST OFFICE ADDRESS POST OFFICE ADDRESS Oberwall 25 FULL NAME OF FAMILY NAME RESIDENCE, CITIZENSHIP CITY Wuppertal POST OFFICE ADDRESS Oberwall 25 FULL NAME OF FAMILY NAME RESIDENCE, CITIZENSHIP CITY CITY	FULL NAME OF FAMILY NAME DRUX RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF FAMILY NAME HAILY NAME HOIGER POST OFFICE ADDRESS FULL NAME OF FAMILY NAME HAILY NAME HOIGER RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS POST OFFICE ADDRESS FULL NAME OF FAMILY NAME HOIGER RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS POST OFFICE ADDRESS RESIDENCE, CITIZENSHIP FULL NAME OF FAMILY NAME WILDFÖRSTER RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS RESIDENCE, CITIZENSHIP POST OFFICE ADDRESS POST OFFICE ADDRESS Beyenburger Str. 11a FULL NAME OF FAMILY NAME HUFEN POST OFFICE ADDRESS Beyenburger Str. 11a FIRST GIVEN NAME Michael FOST OFFICE ADDRESS BOST OFFICE ADDRESS OBET WUPPERTAL FIRST GIVEN NAME MICHAEL FIRST GIVEN NAME MICHAEL FIRST GIVEN NAME MICHAEL FIRST GIVEN NAME MICHAEL FIRST GIVEN NAME FIRST GIVEN		

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)			wer of Attorney (Continued) Attorney's Docket 5255-38PUS
	FULL NAME OF FAMILY NAME INVENTOR		FIRST GIVEN NAME SECOND GIVEN NAME
2 0	RESIDENCE, CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP
6	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY STATE & ZIP CODE/COUNTRY
Cod	NATURE OF INVENTOR 201	Ise statements may jeopardiz	or imprisonment, or both, under §1001 of Title 18 of the United State the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 203
DAT	M. Dong	DATE	DATE DATE
SIGNATURE OF INVENTOR 204 SIGNATURE OF IN		SIGNATURE OF I	NVENTOR 205 SIGNATURE OF INVENTOR 206
DAT	E	DATE	DATE
	Addit	ional inventor(s) name(s	s) & address(es) attached? [] Yes [x] No